· min.	=
3	Harris .
eager.	344
	ilensi)
j.	H H H H
=	11.18
.,	i ii ii
Ē	
ARRIV.	=
	***
-	

Please type a plus sign (+) inside this box → +	PTO/SB/05 (4/98)  Approved for use through 09/30/2000. OMB 0651-0032  Patent and Trademark Office U.S DEPARTMENT OF COMMERCE to respond to a collection of information unless it displays a valid OMB control number
	Attorney Docket No. 566.39954X00
UTILITY	First Inventor or Application Identifier Toru YOSHIHARA
PATENT APPLICATION	Title VOICE DATA RELAY APPARATUS
TRANSMITTAL	
(Only for new nonprovisional applications under 37 C.F.R § 1.53(b))	
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application content.	Assistant Commissioner for Patents  ADDRESS TO: Box Patent Application Washington, DC 20231
* Fee Transmittal Form (e.g., PTO/SB/17)	5. Microfiche Computer Program (Appendix)
(Submit an original and a duplicate for ree processing)  2 X Specification [Total Pages]	6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
(preferred arrangement set forth below) - Descriptive title of the Invention	a. Computer Readable Copy
- Cross References to Related Applications	b. Paper Copy (identical to computer copy)
<ul> <li>Statement Regarding Fed sponsored R &amp; D</li> <li>Reference to Microfiche Appendix</li> </ul>	c. Statement verifying identity of above copies
- Background of the Invention	ACCOMPANYING APPLICATION PARTS
- Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure  3.	seted)  13. Statement(s) Status still proper and desired  PTO/SB/09-12)  14. Certified Copy of Priority Document(s)  (if foreign priority is claimed)  15. X Other: Figs. 1-2,3A-C  Credit Card Payment Form
	box, and supply the requisite information below and in a preliminary amendment:
Continuation Divisional Continuation  Prior application information: Examiner  For CONTINUATION or DIVISIONAL APPS only: The entire divided Box 4b, is considered a part of the disclosure of the acreference. The incorporation can only be relied upon when a	n-in-part (CIP) of prior application No:/
17. CORRES	PONDENCE ADDRESS
Customer Number or Bar Code Labe!	020457 or Correspondence address below

Registration No. (Attorney/Agent) 29,621 Carl I. Brundidge Name (Print/Type) Date Signature Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

Zip Code

Fax

(Insert Customer No. or Attach bar code label here)

State

Telephone

X Customer Number or Bar Code Labe!



Name

Address

Country

City

PTO/S8/17 (12/99)
Approved for use through 09/30/2000 OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
collection of information unless it displays a valid OMB control number

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

der the Paperwork Reduction Act of 1995, no persons are required to respond to a conection of information differences it disprays a valid CMB control number			
FEE TRANSMITTAL	Complete if Known		
	Application Number		
for FY 2000	Filing Date	March 30, 2001	
Patent fees are subject to annual revision.	First Named Inventor	Toru YOSHIHARA	
Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.	Examiner Name		
See 37 C F.R §§ 1 27 and 1 28	Group / Art Unit		
TOTAL AMOUNT OF PAYMENT (\$)710.00	Attorney Docket No.	566.39954X00	

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)			
The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:  Deposit	3. ADDITIONAL FEES  Large Entity Small Entity Fee Fee Fee Fee Fee Code (\$) Code (\$)	Fee Paid		
Account Number 01-2135	105 130 205 65 Surcharge - late filing fee or oath	0.00		
Deposit Account Antonelli, Terry, Stout&Kraus, LLP	127 50 227 25 Surcharge - late provisional filing fee or cover sheet	0.00		
Name Attorietti, Terry, Stout&Kraus, LEF	139 130 139 130 Non-English specification	0.00		
Charge Any Additional Fee Required Under 37 CFR §§ 1 16 and 1 17	147 2,520 147 2,520 For filing a request for reexamination	0.00		
2. x Payment Enclosed:	112 920* 112 920* Requesting publication of SIR prior to Examiner action	0.00		
Check Money Order Other	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action	0.00		
FEE CALCULATION	115 110 215 55 Extension for reply within first month	0 00		
1. BASIC FILING FEE	116 380 216 190 Extension for reply within second month	0.00		
Large Entity Small Entity	117 870 217 435 Extension for reply within third month	0.00		
Fee Fee Fee Fee Description	118 1,360 218 680 Extension for reply within fourth month	0.00		
104 600 204 245   Hilly flyng fac	128 1,850 228 925 Extension for reply within fifth month	0.00		
106 310 206 155 Design filing fee 710.00	119 300 219 150 Notice of Appeal	0.00		
107 480 207 240 Plant filing fee	120 300 220 150 Filing a brief in support of an appeal	0.00		
108 690 208 345 Reissue filing fee	121 260 221 130 Request for oral hearing	0.00		
114 150 214 75 Provisional filing fee	138 1,510 138 1,510 Petition to institute a public use proceeding	0.00		
	140 110 240 55 Petition to revive - unavoidable	0.00		
SUBTOTAL (1) (\$) 710.00	141 1,210 241 605 Petition to revive - unintentional	0.00		
2. EXTRA CLAIM FEES	142 1,210 242 605 Utility issue fee (or reissue)	0.00		
Fee from  Extra Claims below Fee Paid	143 430 243 215 Design issue fee	0.00		
Total Claims 7 -20** = 0 × 18 = 0	144 580 244 290 Plant issue fee	0.00		
Independent $2 - 3^{**} = 0 \times 80 = 0$	122 130 122 130 Petitions to the Commissioner	0.00		
Multiple Dependent = 0	123 50 123 50 Petitions related to provisional applications	0.00		
**or number previously paid, if greater, For Reissues, see below Large Entity Small Entity	126 240 126 240 Submission of Information Disclosure Stmt	0.00		
Fee Fee Fee Fee Description Code (\$) Code (\$)	581 40 581 40 Recording each patent assignment per property (times number of properties)	0.00		
103 18 203 9 Claims in excess of 20	146 690 246 345 Filing a submission after final rejection (37 CFR § 1.129(a))	0.00		
102 78 202 39 Independent claims in excess of 3	149 690 249 345 For each additional invention to be	0.00		
104 260 204 130 Multiple dependent claim, if not paid	examined (37 CFR § 1.129(b))	0.00		
109 78 209 39 ** Reissue independent claims over original patent	Other fee (specify)	0.00		
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	Other fee (specify)	0.00		
SUBTOTAL (2) (\$) 0.00	Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00			
SUBMITTED BY	Complete (if applicable)			
Name (Pnnt/Type) Carl I. Brundidge	Registration No (Attorney/Agent) 29,621 Telephone 703-312-	6600		
Signature	Date 03-30-0			

WARNING:

Info/mation on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.